LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page____ of ___Page(s)
THIS SPACE FOR OPPICE USE ONLY

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|---|---|-----------------------------------|-------------------------------------|--------------------|--|---|---------------|--------|--------------------------------|----------------|----------|----------------|--------------------|---------------|--|
| Lobbyist's name and permanent business address | | | | | | | Date prepared | | | | L | Period covered | | | |
| Stan Olson | | | | | | | | | | | | month ending | | | |
| 8169 W. Victory Rd. | | | | | | | 2/1/2005 | | | | | A4-> | | OV = \ | |
| Boise, ID 83709 | | | | | | | | | | | (Mo.) | (Day) | (Yr.) 05 | | |
| Item | Totale | of all magain | | | - In-mand 1 | ha. 7 alaka | | | abbededa Eat | | h - 16 - | L | 1 | | |
| C | tegory of Ex | penditure | T | | Proportio | nate amoi | mts c | ontrib | obbyist's Empluted by each emp | | | | | oyer. | |
| Raimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Nat Have to he Reported | | | * Total Amount for All Employers | | Itam 3, at bottom of Employer No. 1 | | - | | | Employer No. 3 | | /o 3 T | . 3 Employer No. 4 | | |
| Entert | ainment and Refreshm | | \$ | | Zanproyer Avo. A | | - | | | | | 10.5 | Zinproyer Iva. 4 | | |
| | Accommoda | | 7 | | , | | \$ | | s | | | | • | | |
| Adver | tising | | | | | | | | | | | | | | |
| Travel | | | | | | | _ | | | _ | | | | | |
| Teleph | one | | l | | | | _ | | | <u> </u> | | | | | |
| Other | Expenses or | Services | | | | | | | | | | | | | |
| | | Total | s | 0.00 | \$ | 0.0 | ю_ | s | 0.00 | s | (| 0.00 | s | 0.00 | |
| | | | | | | | | | a total amount for | | | poniq pe et | uered on P | age 1. | |
| Ptem 2 | Date | or each expend | Pla | | GOLIZIS (\$3 | | CAUST | | | | | ublic Offic | ials in Gro | шр | |
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| _ | Continued | attached page(s | | | | 1 | | | | | | | | | |
| | COMMITTEE ON | amacios pagoto | <u>/</u> | | | | Ite | | Fr | nnioved (|) Neme | s) and Add | iress(es) | | |
| | | INST | TRUCTIO | ns | | | 3 | | | | | | | | |
| | o should file 6617 Idaho (| e this form: A Code. | ny lobbyis | t registered | under Sect | ion | | | se Schools 9 W. Victory | Rd., E | soise, | ID 8370 | 9 | | |
| | | : Monthly re | | vithin ten (10 | D) days of | the | No.2 | | | | | | | | |
| • | | • | | | | | | | | | | | | | |
| TO BE FILED WITH: Bon Yourse Secretary of State | | | | | | No.3 | | | | | | | | | |
| | PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | | | | | | No.4 | | | | | | <u> </u> | | |

| 4 P | Date | | Amount | HOE, OF ICK OF OU DESIGN OF | r for or on behalf of any legislator. Name of Legislator Receiving or Benefited | | | | | | | |
|---------|----------------------------------|--------------------------------------|---|--|--|---|--|--|--|--|--|--|
| | | | | | NONE | | | | | | | |
| TOTAL C | or Her the Lo code ble) | bbylst w Bill, E. Legisler infor Boi | Resolution or other ras supporting or op | on, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number the viewpoint District on adcuation. | 01 02 03 04 05 06 | taxarios, revenue, budget, appropriations, bids, flee, funds Government, county | | Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, ender insurance (excluding health insurance) Lebor, selectes and wages, collective hargaining Law enforcement, neurst, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, public assistance, wedimen's conspensation Transportation, highways, streets and roads Utilides, communications, televisions, radio, newspaper, power, CATV, gas | | | | |
| | | | | shove is a true, complete and 67-4624 Idahe Code. | 25 | | | | | | | |